DEPARTMENT OF HEALTH AND FAMILY SERVICES Division of Disability and Elder Services Printed 06/20/2006

Provider Inspection Summary

For the period 05/01/2003 to 04/30/2006 Adult Day Care Facility STATE OF WISCONSIN
Bureau of Quality Assurance
P.O. Box 2969
Madison WI 53701-2969

Facility Information

Facility Name: EVELYNS ADULT DAY CARE (0009871)

Address: 336 MICHAEL CT, PORT WASHINGTON, WI 53074

License Status: REGULAR

Licensed/Certified/Registered 02/10/2003

Regional Office: NORTHEASTERN REGION (GREEN BAY), (920) 448-5240

Survey History

Survey ID: 0096387 End Date: 01/31/2006 Type: STANDARD Purpose: SURVEY

Results: NO STATEMENT OF DEFICIENCY ISSUED

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